



St John

Here for Life

Christchurch Attacks 15 March 2019

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St John, New Zealand

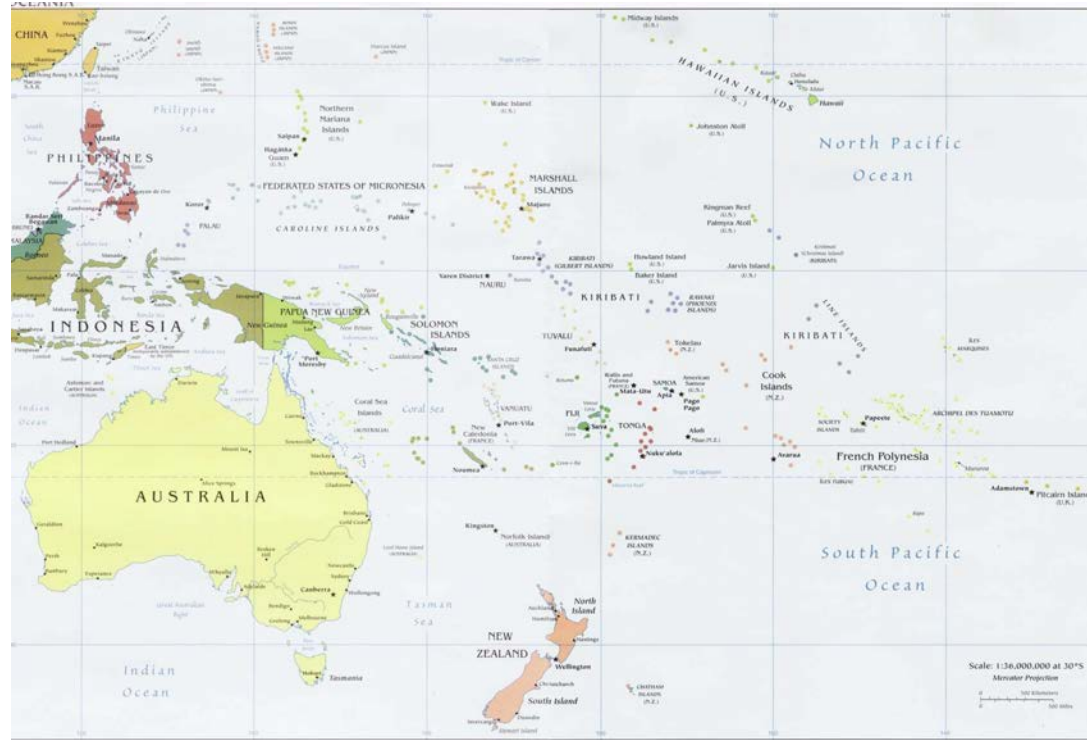


No conflicts or disclosures

Court process is over, but still open Coroners cases

St John had over 50 staff involved in this operation plus bystanders, NZ and Foreign law enforcement tactical medics and NZDF personal.

New Zealand



- 260,000 km²



- 5,093,310 population.
- Ethnically diverse.(2018 Census)
 - 70.2 European
 - 16.5 Maori
 - 15.1 Asian
 - 8.1 Pacifica
 - 1.2 Middle Eastern and African
- 50% Areligious and 44% Religious
 - Christian 38%
 - Hindu 2.6%
 - Muslim 1.31%
 - Other religions 2.83%
 - Flying Spaghetti Monster 0.2%



Christchurch

- Second largest City in NZ
- 376,400 population
- Biggest city in the South Island
- Major earthquakes in 2010 / 2011
- Single acute hospital
 - Two non-acute hospitals
 - 800 beds
 - All services
 - ED ~90,000 attendances per yr



St John, New Zealand

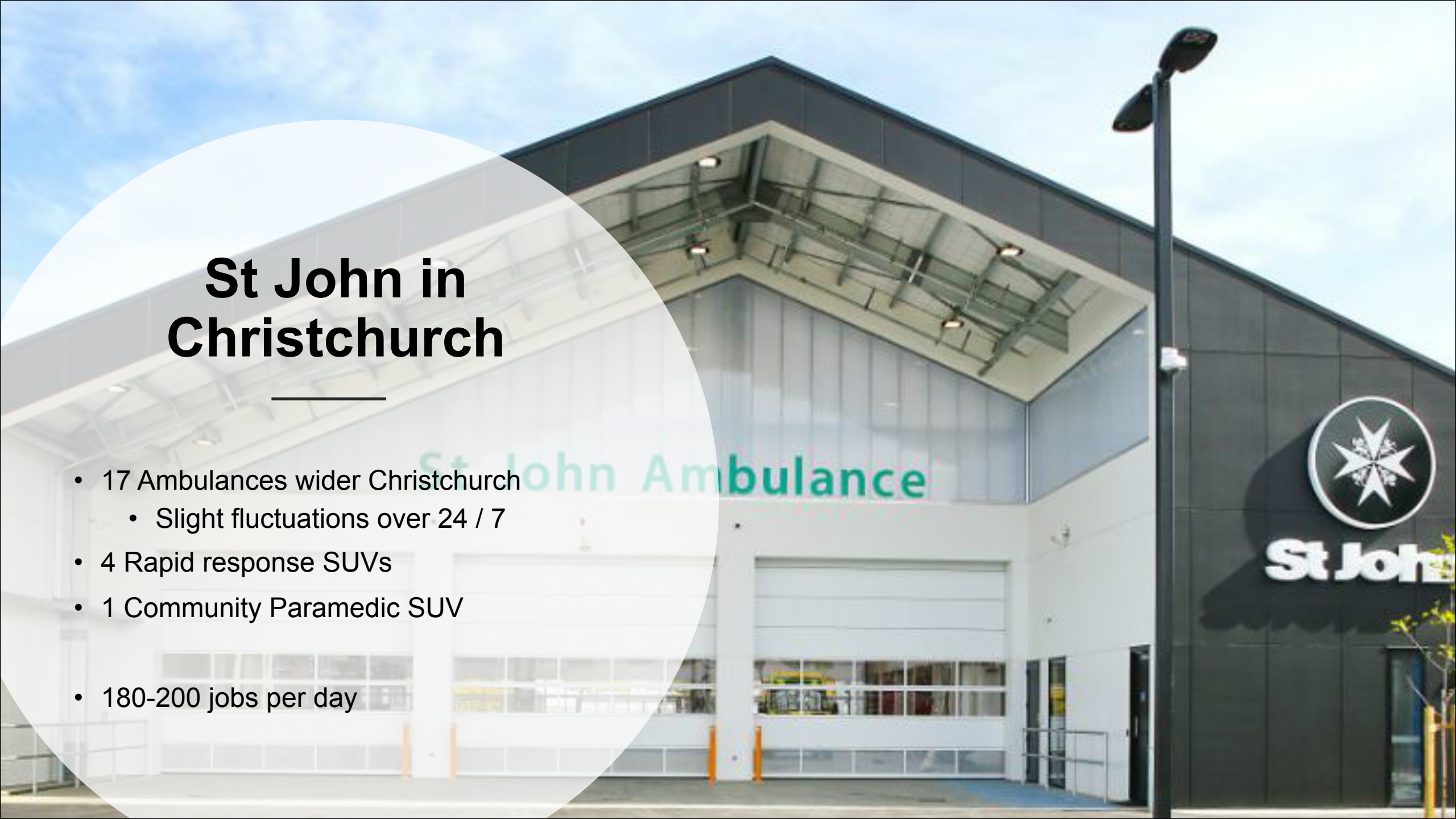
- 4.2 Million people spread over 260,000 km²
- 94% of population
- Rural and urban case mix
- ~3500 staff
- 400 vehicles
- ~1300 Emergency calls per day



- 4 qualification levels with para-medicine in NZ
 - Emergency Medical Technician (~25%)
 - Paramedic (~55%)
 - Intensive Care Paramedic (MICA) (~15%)
 - Extended Care Paramedic (~2%)
- Specialist Emergency Response Team (SERT) Paramedics
 - CBR
 - Search and Rescue
 - Additional training to work with Police in Hot and Warm zones
 - Primarily Auckland and Christchurch

St John in Christchurch

- 17 Ambulances wider Christchurch
 - Slight fluctuations over 24 / 7
- 4 Rapid response SUVs
- 1 Community Paramedic SUV
- 180-200 jobs per day



St John and MCI's

- 2011 2nd Christchurch Earthquake
- 2019 Christchurch Shooting
- 2019 Whakaari / White Island Eruption



Justice and Emergency Services Precinct

Primary Emergency Operations Centre



Comm's Centre



Amb EOC



Police in NZ

- National Police Force
- Not routinely armed
 - But do carry Tasers and OC spray
- Firearms available to all officers (routinely carried in Incident vehicles).
 - Glock 17
 - Bushmaster rifles
- Two specialised armed units
 - Armed Offenders Squad – regional teams drawn from front line staff (part-time). High risk policing / cordon and contain role
 - Special Tactics group – full time. Auckland / Wellington / Christchurch teams. Counter-terrorism / Offensive role



Police Intelligence Briefing (~late-2017)

- Overall threat considered low
- Islamic terror threat was considered most likely
 - 20-40 specific individuals under watch
- Concerns over refugees arriving by boat
- White supremacy risk thought to be small but present and poorly organized.

NZ Firearms laws prior to March 2019

- Category A
 - Rifles and Shotguns
 - Include semi-automatics. Max magazine capacity 5 rounds.
 - Basic license / security check / referees check
- Category B
 - Pistols
 - Additional security requirements / member of a licensed pistol club / additional security checks
- Category C
 - Collectors license
- Category D
 - Dealers license
- Category E
 - Military style semi-automatics and high-capacity magazines
 - Additional security requirements and checks



St John

Here for Life

Friday 15th March 2019

Any other Friday...

- Friday afternoon - normal business hours
- Average workload day
 - Additional ambulance resources on the road
 - Armed Offenders Squad / Special tactics group training at CJESP ** with overseas experts
 - PRIME Training course being delivered
- 70+ available beds at Christchurch hospital
- CDHB ED nursing shift change in play

** Christchurch Justice and Emergency Services Precinct



Scene locations





Initial intel: Masjid Al Noor

- First call received at 1345hrs
- Approx. 20 calls thereafter
- Initial intelligence:
 - Active shooter, location unknown
 - Rapid escalation in patient number updates
 - Multiple patients (est's; 5 > 7 > 30 > 40+)
 - Multiple deceased (est's; 10 > 30 > 40+)

Initial intel: Linwood Islamic Centre

- 12 minutes after the first 111 call for Masjid Al Noor - first call for Linwood Islamic Centre (1357hrs).
- Approx. 8 calls in total received.
- SERT medic first on scene and reports of multiple status 0 patients, and multiple others requiring transport (at 1421hrs).



Non ambulance first response

- Police running a sniper course for Armed Offenders Squad and Special Tactics group
- Visiting instructors from Australian Federal Police and FBI
- Responded with NZ Police
- Significant amount of initial Haemorrhage control undertaken by Police Medics



The scene: Masjid Al Noor

- First ambulance located at 1355hrs (10min after first call)
- Large scene, spread out over 1km
- 42 patients deceased – within and outside the Mosque
- Multiple status 1 or 2 patients - many with one or more Gun Shot Wounds (GSW's).
- First patient arrived at hospital by ambulance at 1405hrs



- 1407hrs Ambulance Commander in place
- Triage conducted in warm zone under Police protection
- > 24 units dispatched, many ambulances transported multiple patients responding to the incident multiple times
- Very quick turnaround at hospital
- By 1507hrs, the scene was clear of patients requiring transport.

The scene: Linwood Islamic Centre

- Took much longer to secure this scene
Armed Offenders Squad access by road
- Scene advised safe at 1432hrs
- 1433hrs first ambulance on scene
- Seven deceased on scene
- Three patients transported by ambulance,
all status 1 and 2 with multiple GSW
- 1455hrs scene clear of patients



Christchurch ED

(3rd scene)

- Ambulance staff - coordinated vehicle and patient movements
- Shots reported - lockdown initiated
- Coordinator in place early - TM
- Static vehicles positioned for protection of arriving vehicles
- Amb / ED interface exceptional
- DHB Emergency Operations Centre Liaison established later



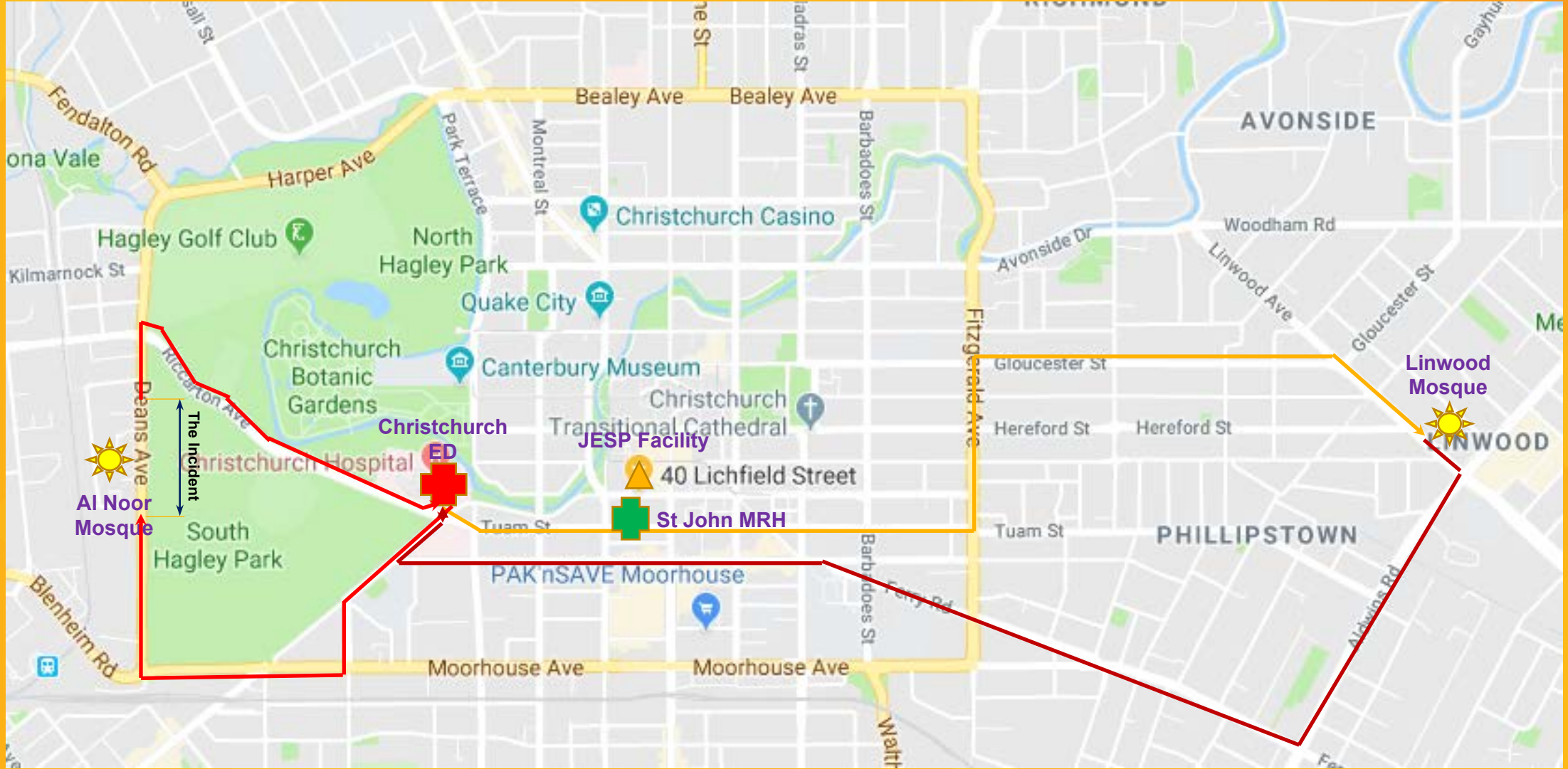
Immediate Incident Complexities - EOC

- Active shooter (x 8...?)
- Staff safety / Safe Forward Point
- Experienced staff frontline at incident
- Proximity to Hospital
- Multiple scenes
- Pace of escalation
- Communications – extreme load
- Self responders
- Emergency services HQ lockdown

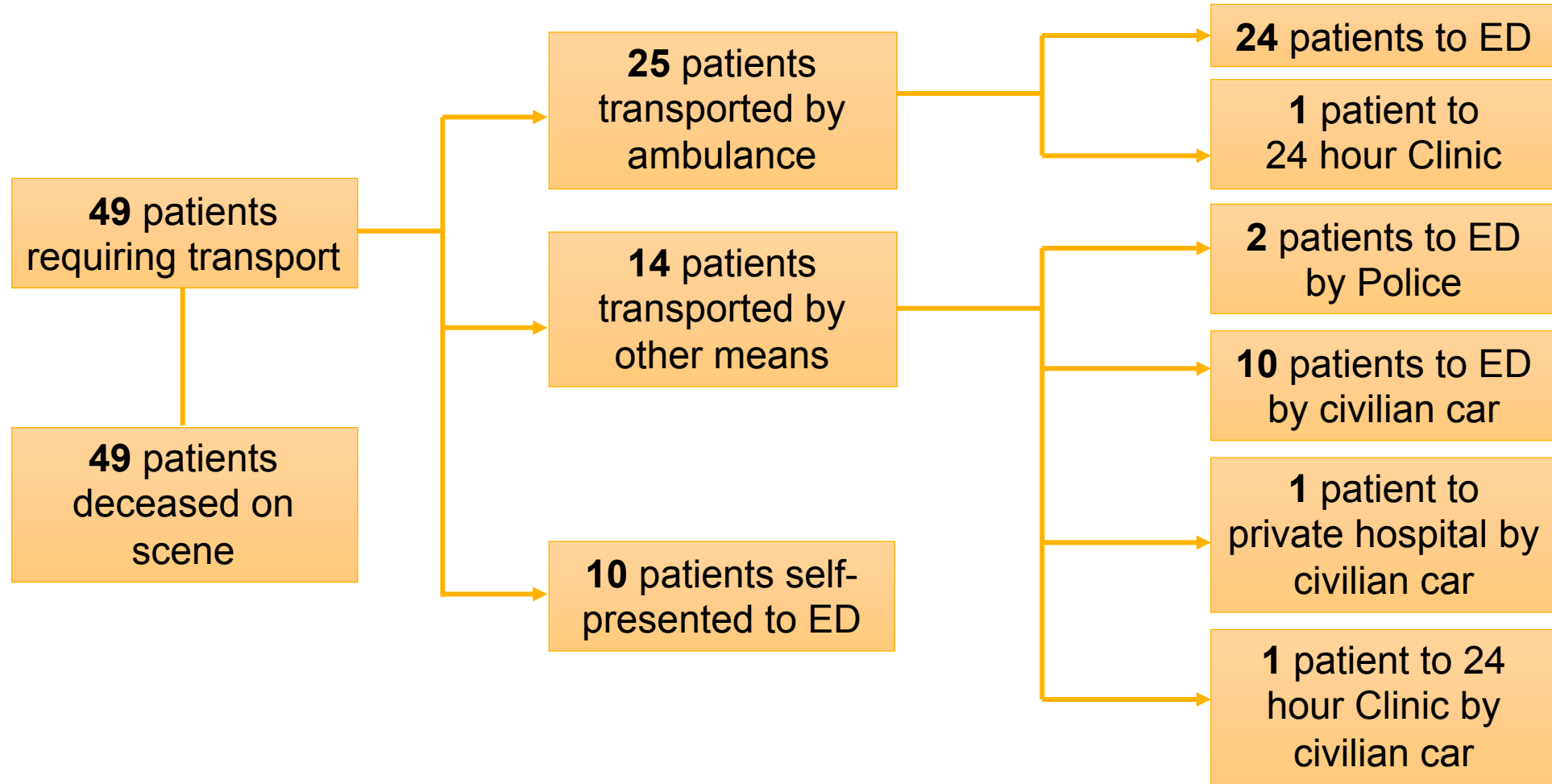




Response Routes



Patient transport and destination



Key facts and figures

- Total number of patients deceased (across both scenes): **49 patients**
- Number of patients transported by ambulance: **25 patients**
- Number of ambulance personnel directly involved in care: **>50 personnel**
- Number of minutes taken to clear both scenes following the initial 111 call: **70 minutes**



Capture / Arrest

- Captured by police after leaving second Mosque.
- Plan to travel to Ashburton (about 45 mins from Christchurch) to attach another Mosque.
- Car had been identified and broadcast to all Police
- Element of luck
 - Two Policemen on a return-to-work programme returning from rehab spotted him and performed a rolling stop and extricated him from his car, at significant risk given IED's in car



Post event complexities

- Hospital lock down
- BAU resilience - immediate
- Staff Welfare
- Media Profile
- Public outpouring / events
- Response investigation
 - Staff statements
 - Data analysis
 - Police / DHB liaison
- Return to BAU
- DVI support
- Sustained high security alert status ++



Peer support / staff welfare

- Strong lessons learnt following Christchurch Earthquake
- Unprecedented event
- Organizational Clinical Psychologist – St John
- In-house Peer Support
- External expertise recruited – MAP / Off Shore
- Rapid return to BAU
- Staff welfare tracking tools developed
- Increased presence of peer and psych support at all post incident related events



Perpetrator

- Brenton Tarrant
 - Australian citizen
 - Far Right ideology
 - Planning anti-Islamic terror attack for several years.
 - Organised and methodical
 - Illegally obtained both license and firearms
 - Chose NZ as believed it would be easier target than Australia.





Live Stream

- Live streamed to YouTube
- First time in West a terrorist attack has been live streamed.
- From several minutes before first attack to ½ way between two targets.
- Camera continued recording until had been in police custody for several hours after live stream dropped.
- YouTube and mainstream content providers are constantly removing copies still easily found on the Internet.

Politics

- Fixation on the conspiracy theory of the “the great replacement”
- Islam taking over countries by immigrant birthrates being greater than the natives of that country.
- Widely held with alt. right groups.
- Wrote a detailed manifesto around this. The goal of the shooting to start a race war.
- Banned publication now in NZ

The Great Replacement



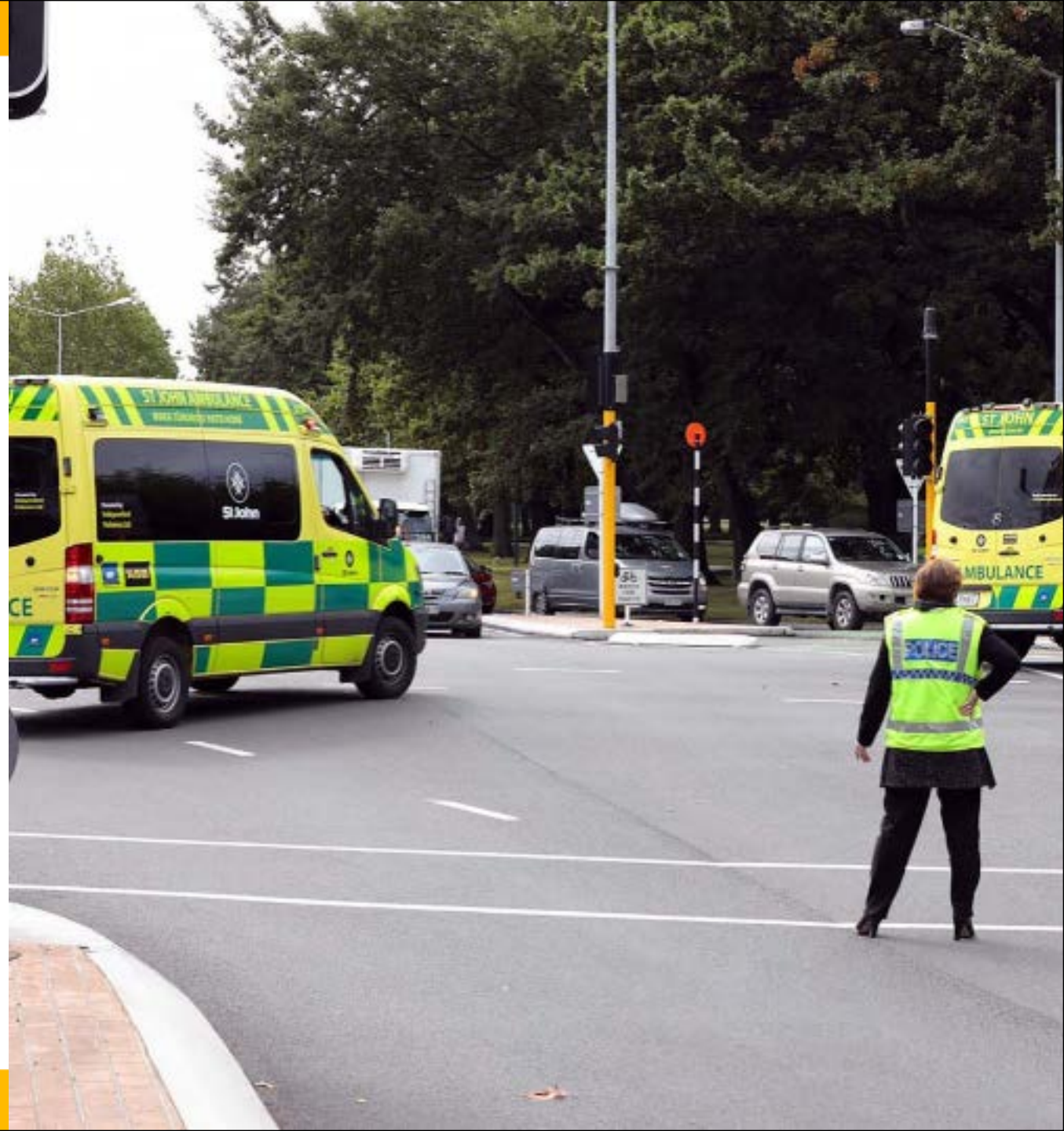
Trial and Conviction

- Initially pleaded not guilty
- Held at Maximum security prison in Auckland
- Changed plea 26 March 2020 to guilty.
- Sentencing occurred 24th-27th August 2020 in Christchurch
 - Guilty of 51 Murder charges, 40 Attempted murders, 1 Terrorism charge
- Sentenced Life in Prison without parole

Lessons Learned

Active Shooter / Mass Violence scenarios can happen in NZ....!!

- There is no substitute for experienced frontline ambulance responders but role of first responders underestimated
- Sound clinical decision making and leadership saved many lives on the day
- Proximity to facilities impacted significantly on response outcome
- Could we consistently replicate this response under other circumstances?
 - Many aspects luck in response



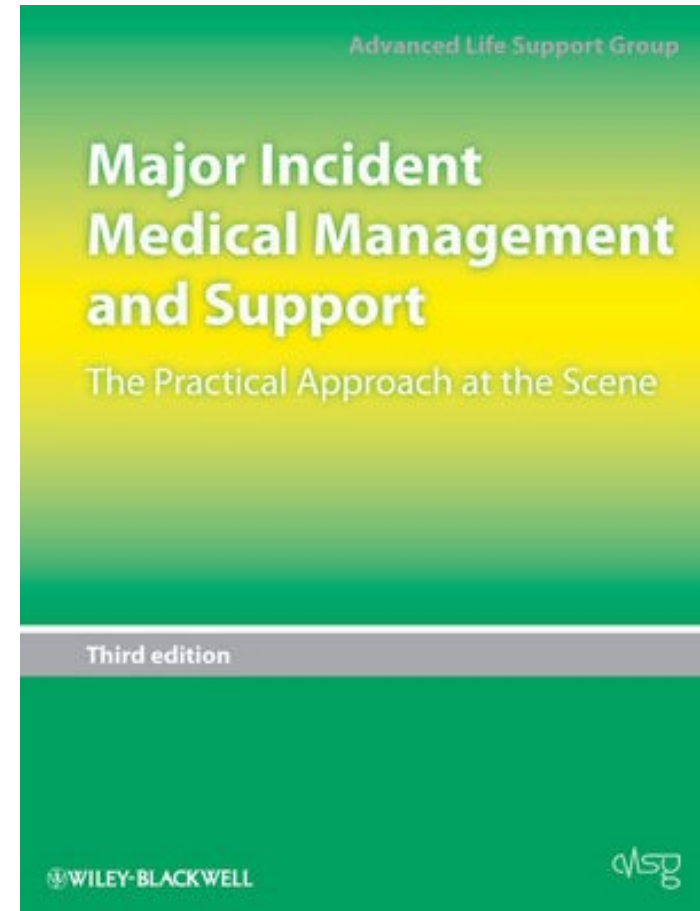
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- **Patient Identification** – we need to improve large scale MCI patient identification and patient record keeping processes
 - % of patients with completed documentation lower than published findings for other similar terrorist events.
 - **Patient Triage** – we need establish tools and processes for large numbers of seriously injured
 - Processes work well for <20 patients but not so well for greater numbers
 - **Self Responding** – we need to improve our ability to track individual staff and control self-responding
 - **Load and go** – clear understanding of principle, but some issues with balance



Ongoing development

- **Training** - refresh all aspects of MCI response expectations
- **Communications** - improve radio com's including, single channel bottlenecks, radio etiquette, and radio equipment
- **SERT** - review deployment of SERT personnel and coordination with other emergency services
- **Risk Assessment** - develop tools for making dynamic risk assessments in high-risk situations
- **Personal Protection Equipment** – review response expectations and requirements for Active Shooter / High Risk incidents

CIMS Vs. MIMMS



Summary

- NZ considered itself safe from large terrorist atrocities
 - Reflected in Security services priorities and in wider MCI planning
 - No real plans for roaming gunman within plans we had
- Christchurch Mosque shootings resulted in 52 deaths and 49 seriously physically injured people
- NZ now a less naïve place
- Survival significantly enhanced by early haemorrhage control by special tactics medics.
- Lead to evolution of tactical medicine within NZ.



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Conclusion & Questions?

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